


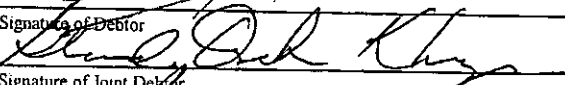
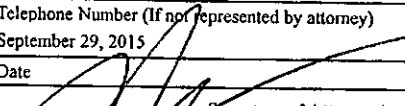
B1 (Official Form 1) (04/13)

United States Bankruptcy Court Northern District of Illinois						Voluntary Petition													
Name of Debtor (if individual, enter Last, First, Middle): <b>Khizan, Zeiad, K.</b>					Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Oraham, Gladys</b>														
All Other Names Used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names Used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):														
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 0006					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 7894														
Street Address of Debtor (No. and Street, City, and State): 722 Craine Street Unit 3 Niles, Illinois 60714					Street Address of Joint Debtor (No. and Street, City, and State): 722 Craine Street Unit 3 Niles, Illinois 60714														
County of Residence or of the Principal Place of Business: Cook					County of Residence or of the Principal Place of Business:														
Mailing Address of Debtor (if different from street address):					Mailing Address of Joint Debtor (if different from street address):														
Location of Principal Assets of Business Debtor (if different from street address above):																			
<b>Type of Debtor</b> (Form of Organization) (Check one box ) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below )			<b>Nature of Business</b> (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other			<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding													
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests.  Each country in which a foreign proceeding by, regarding, or against debtor is pending:			<b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)			<b>Nature of Debts</b> (Check one box ) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose <input type="checkbox"/> Debts are primarily business debts.													
<b>Filing Fee</b> (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					<b>Chapter 11 Debtors</b> Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owned to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter) ----- Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b)														
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.									THIS SPACE IS FOR COURT USE ONLY										
<b>Estimated Number of Creditors</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><input type="checkbox"/> 1-49</td> <td style="text-align: center;"><input type="checkbox"/> 50-99</td> <td style="text-align: center;"><input type="checkbox"/> 100-199</td> <td style="text-align: center;"><input type="checkbox"/> 200-999</td> <td style="text-align: center;"><input type="checkbox"/> 1,000-5,000</td> <td style="text-align: center;"><input type="checkbox"/> 5,001-10,000</td> <td style="text-align: center;"><input type="checkbox"/> 10,001-25,000</td> <td style="text-align: center;"><input type="checkbox"/> 25,001-50,000</td> <td style="text-align: center;"><input type="checkbox"/> 50,001-100,000</td> <td style="text-align: center;"><input type="checkbox"/> Over 100,000</td> </tr> </table>										<input type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> Over 100,000
<input type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000		<input type="checkbox"/> Over 100,000									
<b>Estimated Assets</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> \$0 to \$50,000</td> <td style="text-align: center;"><input type="checkbox"/> \$50,001 to \$100,000</td> <td style="text-align: center;"><input type="checkbox"/> \$100,001 to \$500,000</td> <td style="text-align: center;"><input type="checkbox"/> \$500,001 to \$1 million</td> <td style="text-align: center;"><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td style="text-align: center;"><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td style="text-align: center;"><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td style="text-align: center;"><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td style="text-align: center;"><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td style="text-align: center;"><input type="checkbox"/> More than \$1 billion</td> </tr> </table>										<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion
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<b>Estimated Liabilities</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> \$0 to \$50,000</td> <td style="text-align: center;"><input type="checkbox"/> \$50,001 to \$100,000</td> <td style="text-align: center;"><input type="checkbox"/> \$100,001 to \$500,000</td> <td style="text-align: center;"><input type="checkbox"/> \$500,001 to \$1 million</td> <td style="text-align: center;"><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td style="text-align: center;"><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td style="text-align: center;"><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td style="text-align: center;"><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td style="text-align: center;"><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td style="text-align: center;"><input type="checkbox"/> More than \$1 billion</td> </tr> </table>									<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	
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BI (Official Form 1) (04/13)

Page 2

<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): Zeiad K. Khizan and Gladys Oraham	
<b>All Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet.)</b>			
Location Where Filed:	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)</b>			
Name of Debtor	Case Number:	Date Filed:	
District	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).  <div style="display: flex; justify-content: space-between; align-items: center;"> <span>X _____</span> <span>_____</span> </div> <div style="display: flex; justify-content: space-between; align-items: center;"> <span>Signature of Attorney</span> <span>Date</span> </div>	
<b>Exhibit C</b>  Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition <input checked="" type="checkbox"/> No			
<b>Exhibit D</b>  (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)  <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)  <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <div style="text-align: center; margin-bottom: 10px;">         _____          (Name of landlord that obtained judgment)       </div> <div style="text-align: center; margin-bottom: 10px;">         _____          (Address of landlord)       </div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and  <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.  <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1))			

<b>Voluntary Petition</b> (This page must be completed and filed in every case)	Name of Debtor(s): Zeiad K. Khizan and Gladys Oraham
<b>Signatures</b>	
<p><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code.</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u></u>          Signature of Debtor</p> <p>X <u></u>          Signature of Joint Debtor</p> <p>_____          Telephone Number (If not represented by attorney)</p> <p>September 29, 2015          Date</p> <p>X <u></u>          Signature of Attorney*</p> <p>_____          Printed Name of Attorney for Debtor(s)          The Law Offices of Howard Peritz</p> <p>_____          Firm Name          1121 Lake Cook Road, Suite p          Address          Deerfield, Illinois 60015</p> <p>_____          847 562 5880          Telephone Number          847 562-5880</p> <p>_____          Date</p> <p><small>* In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p> <p><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>_____          Signature of Authorized Individual</p> <p>_____          Printed Name of Authorized Individual</p> <p>_____          Title of Authorized Individual</p> <p>_____          Date</p>	<p><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.</p> <p><input type="checkbox"/> Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____          (Signature of Foreign Representative)</p> <p>_____          (Printed Name of Foreign Representative)</p> <p>_____          Date</p> <p><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notice and information required under 11 U.S.C. 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.</p> <p>_____          Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____          Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer) (Required by 11 U.S.C. § 110)</p> <p>_____          Address</p> <p>X _____</p> <p>_____          Date</p> <p>Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above</p> <p>Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110, 18 U.S.C. § 156</p>

**UNITED STATES BANKRUPTCY COURT**  
Northern District of Illinois

In Re: Zeiad K. Khizan and Gladys Oraham  
Debtor

Case No. \_\_\_\_\_  
(if known)

Chapter 7

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0 00		
B - Personal Property	Yes	6	\$14,220 00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		\$9,429 00	
E - Creditors Holding Unsecured Priority Claims	Yes	2		0 00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$20,000 00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,210 07
J - Current Expenditures of Individual Debtor(s)	Yes	1			3,286 00
TOTAL		20	\$14,220 00	\$29,429 00	

**UNITED STATES BANKRUPTCY COURT**  
**Northern District of Illinois**

In Re: Zerad K. Khizan and Gladys Oraham  
**Debtor**

Case No. \_\_\_\_\_  
 (if known)  
 Chapter 7

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)(whether disputed or undisputed)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)(whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

State the following:

Average Income (from Schedule I, Line 12)	3,210 07
Average Expenses (from Schedule J, Line 22)	3,286 00
Current Monthly Income (from Form 22A-I Line 11; OR, Form 22B Line 14, OR, Form 22C-I Line 14)	4955 67

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" COLUMN		\$1,293 00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	0 00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		\$20,000 00
5 Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$21293 00

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption	Amount of Secured Claim
Total			\$0 00	

In Re: Zeiad K. Khizan and Gladys Oraham

Case No

Debtor

(if known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attach a separate sheet properly identified with the same case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint or Community". If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state the person's name and address under "Description and Location of Property". If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
1. Cash on hand.		100.00	j	100.00
2. Checking, savings or other financial accounts, CD's, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses or cooperatives.		Checking Account	j	250.00
3. Security deposits with public utilities, telephone companies, landlords, and others.			j	
4. Household goods and furnishings, including audio, video, and computer equipment.		normal household furnishings		500.00

In Re:

Zeiad K. Khizan and Gladys Oraham

Case No.

Debtor

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles	X			
6. Wearing apparel.		Normal Wearing Apparel	j	300 00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1) Give particulars.	X			
12. Interest in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			



In Re:

Zeiad K. Khizan and Gladys Oraham

Document

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Case No.

Debtor

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
13 Stock and interests in incorporated and unincorporated businesses. Itemize	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15 Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in real estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

In Re: Zeiad K. Khizan and Gladys Oraham

Case No.

Debtor

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
21. Other contingent or unliquidated claims of every nature, including tax refunds, counter-claims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2011 Toyota Camry	J	7,000.00
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1999 Toyota Avalon		1000.00
25. Automobiles, trucks, trailers and other vhciles and accessories.		1008 Toyota Highlander		15,000.00
26. Boats, motors, and accessories.	X			

In Re:

Zeiad K. Khizan and Gladys Oraham

Case No.

Debtor

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed	X			

In Re: Zelad K. Khizan and Gladys Oraham

Case No. \_\_\_\_\_

Debtor

(if known)

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under.  
(Check one box)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675 \*

☐ 11 U.S.C. § 522(b)(2)

☐ 11 U.S.C. § 522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
100.00	735-5/12-1001(b)	100.00	100.00
Checking Account	735-5/12-1001(b)	250.00	250.00
normal household furnishings	735-5/12-1001(b)	500.00	500.00
Normal Wearing Apparel	735-5/12-1001(a)	300.00	300.00
1999 Toyota Avalon	735-5/12-1001(c)	1000.00	1000.00



In Re: Zeiad K. Khizan and Gladys Oraham

Case No.

Debtor

(if known)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A B, a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D

Creditor's Name and Mailing Address Including Zip Code	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred, Nature of Lien, and Description and Value of Property Subject to Lien	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account Number: 54074000001		04/12 2011 Toyota Camry				6068.00	
First Bank & Trust 820 Church Street Evanston, Illinois 60201		VALUE \$ 7000.00					
Account Number: 515769128684		03/10 2008 Toyotal Highlander				3361.00	
Wells Fargo Dealer Services 23 Pasteur Irvine, California 92618		VALUE \$ 15000					
Account Number:							
		VALUE \$					
Subtotal (Total of this page)						\$9,429.00	\$0.00
Total (Use only on last page)						\$9,429.00	

(Report also on  
Summary of  
Schedules.)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of this petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

In Re: Zeiad K. Khizan and Gladys Oraham

Case No. \_\_\_\_\_  
(if known)

Debtor

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided 11 U.S.C. § 507(a)(7)

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTR, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 04/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment



In Re: Zeiad K. Khizan and Gladys Oraham

Case No. \_\_\_\_\_

Debtor

(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F

Creditor's Name and Mailing Address Including Zip Code, and Account Number	Codebtor	Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 48 A/r concepts 18-3 E. Dundee Road Suite 330 Barrington, Illinois							100.00
Account Number: 504994141865 CBNA P.O. Box 6189 Sioux Falls, South Dakota							1201.00
Account Number: 12002361 Cach, LLC 4340 S. Monaco Second Floor Denver, Colorado 80237							533
Account Number: 517805946349 Capital ONE Bank P.O. Box 30253 Salt Lake City, Utah 84130			Credit card debt				547.00
Subtotal							\$2,381.00
Total							

3 continuation sheets attached

(Use only on last page of the completed Schedule F)  
(Report also on Summary of Schedules and, if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)

In Re: Zeiad K. Khizan and Gladys Oraham

Case No.

Debtor		(if known)			
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed
Account Number: 51559800 Capital One P.O. Box 30253 Salt Lake City, Utah 84130					Amount of Claim 922.00
Account Number: 48623626 Capital One P.O. Box 30253 Salt Lake City, Utah 84130					656.00
Account Number: 517805956896 Capital One Bank P.O. Box 30253 Salt Lake City, Utah 84130		credit card debt			761 00
Account Number: 515599004701 Capital One Bank P.O. Box 30253 Salt Lake City, Utah 84130		credit card debt			429.00
Account Number: 486236260928 Capital One Bank P.O. Box 30253 Salt Lake City, Utah 84130					552.00
Account Number: 48733395980 Capital One Bank P.O. Box 30253 Salt Lake City, Utah 84130		credit card debt			2151 00
Account Number: 51559900 Capital One bank P.O. Box 30253 Salt Lake City, Utah 84130		credit card debt			415 00
Subtotal					\$5,886.00
Total (Use only on last page of the completed Schedule F) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)					

In Re Zeiad K. Khizan and Gladys Oraham

Case No.

Debtor		(if known)			
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed
Account Number: 169609-051050 Capital One/Best Buy 4851 Cox Road Richmond, Virginia 23229					Amount of Claim 1300 00
Account Number: 585637245004 Commenity Bank P.O. Box 182789 Columbus, Ohio 43218		credit card debt			358.00
Account Number: 444796112954 Credit One Bank 585 S. Pilot Street Las Vegas, NV 89119					1895.00
Account Number: 543362896530 First Premier Bank 900 W. Delaware Sioux Falls, South Dakota 57104		credit card debt			411 00
Account Number: 516648420276 MABT/CONF 121 Continental Drive Suite 1 Newark, Delaware 19713		credit card debt			740 00
Account Number: MCSIHLSS2124 MCSI, Inc. P.O. Box 327 Palos Heights, Illinois 60463					200 00
Account Number: MCSIHHRS02106 MCSI, Inc. P.O. Box 327 Palos Heights, Illinois 60463					200 00
Subtotal					\$5,104.00
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)					

In Re. Zeiad K. Khizan and Gladys Oraham

Case No. \_\_\_\_\_

Debtor		(if known)				
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 412061405109 Merrick Bank P.O.I. Box 9201 Bethpage, NY 11804		Revolving Credit				990 00
Account Number: 856470 Midland Funding 8875 Aero Drive Suite 200 San Diego, CA 92123		credit card debt				1898.00
Account Number: 50258 Monteray Collections 4095 Avenida De La Oceanside, California 92056						964.00
Account Number: P32420048501 Personal Finance 536 W. Main Street Gallatin, Tennessee 37066						597.00
Account Number: 515598004768 Portfolio Recovery Ass 120 Corporate Boulevard Suite 1 Norfolk, Virginia 23502						922 00
Account Number: 600889536419 SYNCB/JCP 4125 Windward Plaza Alpharetta, GA 30005		Credit card det				1258.00
Account Number:						
Subtotal						\$6,629 00
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$20,000.00

In Re: Zeiad K. Khizan and Gladys Oraham

Case No. \_\_\_\_\_

Debtor

(if known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m)

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State Whether Lease is for Nonresidential Real Property. State Contract Number of Any Government Contract

In Re:

Zeiad K. Khizan and Gladys Oraham

Case No. \_\_\_\_\_

Debtor

(if known)

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

Name and Mailing Address of Codebtor	Name and Mailing Address of Creditor

**Fill in this information to identify your case:**

Debtor 1	Zetad	K.	Khizan
	First Name	Middle Name	Last Name
Debtor 2	Gladys		Oraham
(Spouse, if filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: \_\_\_\_\_

Case number (if known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM/DD/YYYY

Official Form B 6I

## Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part I Describe Employment

#### 1 Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed  
☐ Not employed

Debtor 2 or non-filing spouse

- ☐ Employed  
☒ Not employed

Occupation

Section Leader

Employer's name

John Crane

Employer's address

6400 West Oakton Street

Number Street

Number Street

Morton Grove IL 60053

City State ZIP Code

City State ZIP Code

How long employed there?

### Part II Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ 3,572.68	\$
3. Estimate and list monthly overtime pay.	+ \$ 1,383.29	+ \$
4. Calculate gross income. Add line 2 + line 3.	\$ 4,955.97	\$ 0.00

Debtor 1 Zetad K. Khizan Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here..... → 4	\$ 4,955.97	\$ 0 00	
<b>5 List all payroll deductions:</b>			
5a. Tax, Medicare, and Social Security deductions	5a. \$ 966 11	\$	
5b. Mandatory contributions for retirement plans	5b. \$	\$	
5c. Voluntary contributions for retirement plans	5c. \$	\$	
5d. Required repayments of retirement fund loans	5d. \$ 129 47	\$	
5e. Insurance	5e. \$ 650.32	\$	
5f. Domestic support obligations	5f. \$	\$	
5g. Union dues	5g. \$	\$	
5h. Other deductions. Specify _____	5h. + \$	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 1,745 90	\$ 0 00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4	7. \$ 3,210 07	\$	
<b>8. List all other income regularly received:</b>			
8a. Net income from rental property and from operating a business, profession, or farm <small>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income</small>			
	8a. \$	\$	
8b. Interest and dividends			
	8b. \$	\$	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive <small>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</small>			
	8c. \$	\$	
8d. Unemployment compensation			
	8d. \$	\$	
8e. Social Security			
	8e. \$	\$	
8f. Other government assistance that you regularly receive <small>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.</small> Specify: _____			
	8f. \$	\$	
8g. Pension or retirement income			
	8g. \$	\$	
8h. Other monthly income. Specify: _____			
	8h. + \$	+ \$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	9. \$ 0 00	\$ 0 00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,210 07	\$	= \$ 3,210.07
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J Specify: _____			
		11. + \$	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies			
		12. \$ 3,210 07	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?			
<input type="checkbox"/> No.			
<input checked="" type="checkbox"/> Yes. Explain: <span style="border: 1px solid black; padding: 2px;">Spouse has applied for but been denied disability from SS She has filed an appeal.</span>			



**Fill in this information to identify your case:**

Debtor 1 Zciad K.  
First Name Middle Name Last Name

Debtor 2 Gladys Oraham  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: \_\_\_\_\_

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:  
 MM / DD / YYYY \_\_\_\_\_
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

## Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Your Household

1 Is this a joint case?

- ☐ No Go to line 2.
- ☒ Yes Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2 Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4 \$ 1,100.00

If not included in line 4:

4a. Real estate taxes

4a \$

4b. Property, homeowner's, or renter's insurance

4b \$

4c. Home maintenance, repair, and upkeep expenses

4c \$

4d. Homeowner's association or condominium dues

4d \$

Debtor 1 Zeiad K.  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Your expenses**

- |   |   |
|---|---|
| <p>5. <b>Additional mortgage payments for your residence</b>, such as home equity loans</p> <p>6. <b>Utilities:</b></p> <p>6a. Electricity, heat, natural gas</p> <p>6b. Water, sewer, garbage collection</p> <p>6c. Telephone, cell phone, Internet, satellite, and cable services</p> <p>6d. Other Specify: _____</p> <p>7. <b>Food and housekeeping supplies</b></p> <p>8. <b>Childcare and children's education costs</b></p> <p>9. <b>Clothing, laundry, and dry cleaning</b></p> <p>10. <b>Personal care products and services</b></p> <p>11. <b>Medical and dental expenses</b></p> <p>12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.<br/>Do not include car payments</p> <p>13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b></p> <p>14. <b>Charitable contributions and religious donations</b></p> <p>15. <b>Insurance.</b><br/>Do not include insurance deducted from your pay or included in lines 4 or 20.</p> <p>15a. Life insurance</p> <p>15b. Health insurance</p> <p>15c. Vehicle insurance</p> <p>15d. Other insurance. Specify _____</p> <p>16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20<br/>Specify: _____</p> <p>17. <b>Installment or lease payments:</b></p> <p>17a. Car payments for Vehicle 1</p> <p>17b. Car payments for Vehicle 2</p> <p>17c. Other Specify: _____</p> <p>17d. Other. Specify: _____</p> <p>18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).</b></p> <p>19. <b>Other payments you make to support others who do not live with you.</b><br/>Specify: _____</p> <p>20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b></p> <p>20a. Mortgages on other property</p> <p>20b. Real estate taxes</p> <p>20c. Property, homeowner's, or renter's insurance</p> <p>20d. Maintenance, repair, and upkeep expenses</p> <p>20e. Homeowner's association or condominium dues</p> | <p>5. \$ _____</p> <p>6a. \$ _____</p> <p>6b. \$ 350 00</p> <p>6c. \$ 490 00</p> <p>6d. \$ _____</p> <p>7. \$ 300.00</p> <p>8. \$ _____</p> <p>9. \$ 50 00</p> <p>10. \$ 50.00</p> <p>11. \$ _____</p> <p>12. \$ 200 00</p> <p>13. \$ _____</p> <p>14. \$ _____</p> <p>15a. \$ _____</p> <p>15b. \$ _____</p> <p>15c. \$ 120 00</p> <p>15d. \$ _____</p> <p>16. \$ _____</p> <p>17a. \$ 376 00</p> <p>17b. \$ 250 00</p> <p>17c. \$ _____</p> <p>17d. \$ _____</p> <p>18. \$ _____</p> <p>19. \$ _____</p> <p>20a. \$ _____</p> <p>20b. \$ _____</p> <p>20c. \$ _____</p> <p>20d. \$ _____</p> <p>20e. \$ _____</p> |
|---|---|

Debtor 1 Zetad K.  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

21 Other Specify: \_\_\_\_\_

21. +\$ \_\_\_\_\_

22 Your monthly expenses. Add lines 4 through 21.  
The result is your month'y expenses.

22. \$ 3,286.00

23 Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 3,210.07

23b. Copy your monthly expenses from line 22 above.

23b. -\$ 3,286.00

23c. Subtract your monthly expenses from your monthly income.  
The result is your monthly net income.

23c. \$ -75.93

24 Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☐ Yes. Explain here:

Debtor

(if known)

**DECLARATION CONCERNING DEBTOR(S) SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total shown on summary page plus 2), and that they are true and correct to the best of my knowledge, information, and belief.

September 29, 2015

Date

September 29, 2015

Date

Signature of Debtor

Signature of Joint Debtor

\* \* \* \* \*

**DECLARATION AND SIGNATURE OF BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b), (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required under that section, and (4) I will not accept any additional money or other property from the debtor before the filing fee is paid in full.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social-Security No. (Required by 11 U.S.C. § 110)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social-security number of the officer, principal, responsible person or partner who signs this document.

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of Title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156

\* \* \* \* \*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, \_\_\_\_\_, named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary of schedules, consisting of sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date

Signature of Authorized Individual

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.